

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763657

1. Entity Name

NORTH PALM BEACH YOUTH ATHLETIC ASSOCIATION, INC

Principal Place of Business

PO BOX 14682
NORTH PALM BEACH FL 33408

Mailing Address

PO BOX 14682
NORTH PALM BEACH FL 33408

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

SMYTH, PAUL CPA
712 US HWY 1
STE 210
NORTH PALM BEACH FL 33408

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME EISSEY, MARK
STREET ADDRESS 725 LAGOON DR
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Delete

TITLE VPD
NAME BELL, ROBERT
STREET ADDRESS 101 DOSY RD S
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Delete

TITLE TD
NAME MIDDLETON, LISA
STREET ADDRESS 155 EBBTIDE DR.
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Delete

TITLE SD
NAME FIGUERA, MITCHELL B
STREET ADDRESS 729 HUCKLEBERRY LANE
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Delete

TITLE SO
NAME SMYTH, PAUL
STREET ADDRESS 712 US HWY 1 STE 210
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HUDSON BLEVENS, HUDSON
STREET ADDRESS 516 INLET ROAD
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TP
NAME MORRISON, BETH
STREET ADDRESS 548 OVERLOOK DR
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Change ☒ Addition

TITLE SD
NAME EMERY, BRUCE
STREET ADDRESS 726 FAIRHAVEN DR.
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☒ Change ☐ Addition

TITLE SO
NAME GEORGE LOTT
STREET ADDRESS 631 NORTHLAKE BLVD
CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bruce Emery Secretary 1/24/01 561-881-4448

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90179 010 ****70.00

615191



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2220973

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required